U.S. Departmentas eustial-cv-01123-JGC Doc #: 50 ROCESS/PARZELBF2AND DE #USB See "Instructions for Service of Process by U. United States Marshals Service COURT CASE NUMBER PLAINTIFF J3121AN Order of Possession ROBERT NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be served with this Form 285 BIZIAN KEITH ALTORD A196:744 MADISON CORRECTIONAL INSTITUTION P.D.BEX 740 LONDON, OHIO 43140 Number of parties to be served in this case Check for service on U.S.A. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service): Fold Fold TELEPHONE NUMBER DATE Signature of Attorney other Originator requesting service on behalf of X PLAINTIFF 196744 US DEFENDANT 419-283-9282 SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE Signature of Authorized USMS Deputy or Clerk Date District to Total Process District of I acknowledge receipt for the total Origin Serve number of process indicated. (Sign only for USM 285 if more 0 than one USM 285 is submitted) I hereby certify and return that I
have personally served , have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below. ☐ Thereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below) A person of suitable age and discretion Name and title of individual served (if not shown above) then residing in defendant's usual place of abode Date Time Address (complete only different than shown above) Kl am ☐ pm Signature of U.S. Marshal or Deputy Amount owed to U.S. Marshal* or Advance Deposits Total Charges Total Mileage Charges Forwarding Fee Service Fee (Amount of Refund*) including endeavors) \$0.00 REMARKS

PRINT 5 COPIES:

1. CLERK OF THE COURT

USMS RECORD

3. NOTICE OF SERVICE

 BILLING STATEMENT* To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5 ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285 Rev 12/15/80 Automated 01/00 Dear Customer,

The following is the proof-of-delivery for tracking number: 779322808590

Delivery Information:

Status:

Delivered

Delivered To:

Residence

Signed for by:

B.VILLA

Delivery Location:

236 WOODHAVEN CRES

Service type:

FedEx Express Saver

Special Handling:

Deliver Weekday; Residential Delivery; Adult Signature Required

CLYDE, OH, 43410

Delivery date:

Oct 22, 2024 11:18

Shipping Information:

Tracking number:

779322808590

Ship Date:

Oct 18, 2024

Weight:

0.5 LB/0.23 KG

Recipient:

Robert Zilles, 236 Woodhaven Cresent CLYDE, OH, US, 43410 Shipper:

Diane Sackett, United States Marshals Service

1716 Spielbusch Ave. Toledo, OH, US, 43604

